



Utah State Division of Substance Abuse and Mental Health

Mental Health Community Services FY2002 Fact Sheet

Prevalence: How common are mental illnesses?

- One out of five Americans is affected annually by diagnosable mental disorders.
- 5.4% of adults nationwide have Serious Mental Illness or mental disorders that interfere with social functioning.
- 2.6% of adults nationwide have Severe and Persistent Mental Illness (SPMI) with diagnoses of schizophrenia, bipolar disorder, other severe depression, panic disorder or obsessive-compulsive disorder.
- Five to 9% of American children and adolescents ages 9 to 17 have Serious Emotional Disturbance (SED) with severe functional limitations.

Mental illness is a brain disease

- Mental disorders are characterized by abnormalities in thought, emotion, or behavior.
- The brain mediates the influence of biological, psychological, and social factors on human thought, behavior, and emotion in health and in illness.
- Everyday language tends to encourage a misperception that 'mental health' is unrelated to 'physical health.' In fact, the two are *inseparable*.
- Manifestations of mental disorders vary with age, gender, race and culture.

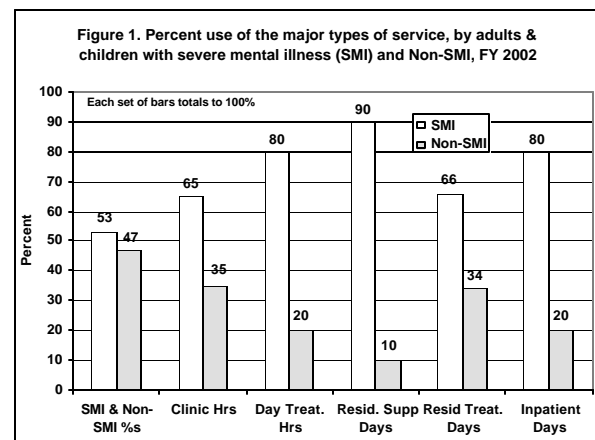
Statistics on Mental Health (U.S. Surgeon General Report 1999)

- Mental illnesses, including suicide, account for 15.4% of the burden of disease in established market economies. Major depression, schizophrenia, bipolar disorder, obsessive-compulsive disorder, panic disorder, and post-traumatic stress disorder are among the leading causes of disability worldwide.
- Only cardiovascular conditions create a higher burden of disease (18.6%). The impact of mental illness is higher than all cancers (15.0%), all respiratory conditions (4.8%), and other conditions and diseases analyzed and reported by the World Health Organization.
- Mental health clients have a greater risk of dying, as well as dying at younger ages, than the general population.

- *Average death ages* for public mental health clients in Utah was 58 years in 1999.
- *Average years of life lost* per mental health client in Utah was 27 years in 1999.

Description of services

- 10 community mental health centers (CMHCs) provided comprehensive public mental health services in all 29 counties.
- 44,244 persons received one or more services.
- Target populations are severely and persistently mentally ill (SPMI) adults and seriously emotionally disturbed (SED) children under 18.
- 23,449 persons served were rated either SPMI or SED. These are persons with severe mental illness (SMI).



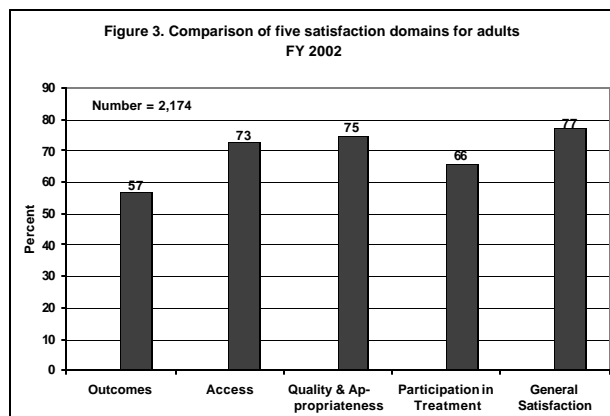
Clinic includes services such as individual, family, group, evaluation and testing, medication management, crisis, and case management. Both residential support and residential treatment provide supervised 24-hour (overnight) care. However, residential support emphasizes assistance in meeting daily needs, while the latter primarily includes treatment designed to assist the client in avoiding hospitalization or transitioning back from hospitalization. Inpatient is 24-hour care in a licensed community hospital.

Client characteristics

- 69% were adults 18 and older.
- 55% of *adult* clients were *female*, while 58% of *child/youth* clients were *male*.
- Most frequent diagnoses for adult clients were major depression, schizophrenia, bipolar disorder, and anxiety.
- Most frequent diagnoses for child/youth clients were attention deficit disorder, adjustment disorder and abuse-related disorders.

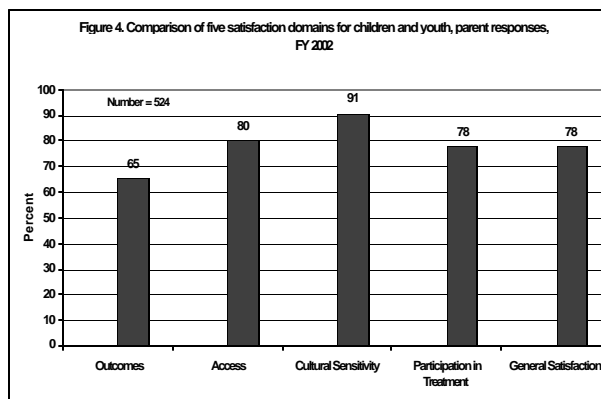
Adult satisfaction with outcomes and services

- 57% perceived their outcomes to be positive. *Perceived* outcomes included questions on improvement in symptoms, functioning, housing, employment, and family and social interaction.
- About three-fourths of the adult clients had positive perceptions about access to treatment, quality and appropriateness, and general satisfaction.
- 66% of the clients were satisfied with their participation in treatment decisions.
- A majority of *adult clients from each of the 10 CMHCs experienced statistically significant improvement in symptoms of psychological distress.*



Parent satisfaction with child outcomes and services

- (65%) of the parents perceived that their child had positive outcomes from treatment.
- Parents were even more satisfied with access to treatment (80%), cultural sensitivity (91%), participation in treatment (78%), and general satisfaction (78%), which includes quality and appropriateness of treatment.



Dollars and sense

- Average expenditure per person was \$2,985 in FY 2002.
- *The impact of budget cuts may be calculated from total cost and average expenditure per person. For example, a budget cut of one percent (1.0%) would translate to 442 fewer persons served.*
- In 1990 (latest year for which data are available), *direct* costs for mental disorders in the U.S. totaled to \$69 billion (U.S. Surgeon General Report, 1999).
- *Indirect* costs of mental illness in the U.S. totaled to \$79 billion in 1990. Most of that amount was due to loss of productivity due to illness (\$63 billion), \$12 billion to early death, and \$4 billion to incarceration and time of individuals providing family care.
- For schizophrenia alone, total indirect costs in the U.S. were almost \$15 billion.

Emerging Trends

- More than ever before the field of mental health is adopting evidenced-based practices to guide program and clinical decisions. Examples include evidence-based practices pertaining to the treatment of persons having serious diagnoses, the use of Assertive Community Treatment, and use of atypical new generation medications for the severely mentally ill.
- While much more effective and having fewer side effects, these atypical new generation medications are costly. Still, there is an overall cost savings and greater efficacy in treating the severely mentally ill.

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